Performance

Report

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| Name of service: | Peter Arney Home |
| Service address: | 1 Gentilli Way SALTER POINT WA 6152 |
| Commission ID: | 7231 |
| Approved provider: | Amana Living Incorporated |
| Activity type: | Assessment Contact - Site |
| Activity date: | 11 September 2023 |
| Performance report date: | 11 October 2023 |

This performance report **is published** on the Aged Care Quality and Safety Commission’s (the **Commission**) website under the Aged Care Quality and Safety Commission Rules 2018.

**This performance report**

This performance report for Peter Arney Home (**the service**) has been prepared by M Glenn, delegate of the Aged Care Quality and Safety Commissioner (Commissioner)[[1]](#footnote-1).

This performance report details the Commissioner’s assessment of the provider’s performance, in relation to the service, against the Aged Care Quality Standards (Quality Standards). The Quality Standards and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

# Material relied on

The following information has been considered in preparing the performance report:

* the assessment team’s report for the Assessment Contact - Site; the Assessment Contact - Site report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers, representatives and others.

The approved provider did not submit a response to the assessment team’s report.

# Assessment summary

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| Standard 3 Personal care and clinical care | Not applicable as not all requirements have been assessed |

A detailed assessment is provided later in this report for each assessed Standard.

# Areas for improvement

There are no specific areas identified in which improvements must be made to ensure compliance with the Quality Standards. The provider is required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.

# Standard 3

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| Personal care and clinical care | |  |
| Requirement 3(3)(d) | Deterioration or change of a consumer’s mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner. | Compliant |
| Requirement 3(3)(g) | Minimisation of infection related risks through implementing:   1. standard and transmission based precautions to prevent and control infection; and 2. practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics. | Compliant |

Findings

Staff described signs and symptoms of clinical deterioration and said any observed changes in consumers’ health is reported to the nurses. Documentation showed consumers are monitored and assessed for clinical deterioration using assessment tools and care is escalated where necessary. Observations showed that deterioration and changed conditions in consumers are recognised and responded to in a timely manner.

Updated policies and procedures are in place to minimise infection related risks and promote the appropriate use of antibiotics. Documentation showed pathology is collected and analysed by the general practitioner prior to treating symptoms of infection and preventative and non-pharmacological strategies are implemented where needed. Staff were observed using personal protective equipment where required and undertaking hand hygiene. Consumers and representatives are satisfied the service minimises infection related risks and said infection outbreaks have been well managed.

Based on the assessment team’s report, I find requirements (3)(d) and (3)(g) in Standard 3 Personal care and clinical care compliant.

1. The preparation of the performance report is in accordance with section 68Aof the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)